

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent Office all information which is known to be material to patentability of this application as defined in § 1.56 of Title 37 of the Code of Federal Regulations.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
FRANCE	98 05425	22 April 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature(s)

Full name of ~~second~~ first inventor MARTI Alexandre

Inventor's signature [Signature]

Date 5.10.2000 Country of Citizenship Switzerland

Residence 12, chemin Champ-Baron / CH - 1209 GENEVE / Switzerland

Post Office Address same as residence

Full name of ~~second~~ joint inventor (if any) LANGE Norbert

Inventor's signature [Signature]

Date October 5th 2000 Country of Citizenship Germany

Residence 23, rue Saint-Roch / CH - 1004 LAUSANNE / Switzerland

Post Office Address same as residence

Full name of third joint inventor (if any) ZELLWEGER MatthieuInventor's signature [Signature]Date 20/10/2000 Country of Citizenship SwitzerlandResidence 40, chemin des Cottages / CH - 1007 LAUSANNE / SwitzerlandPost Office Address same as residence 34, FEUETTA, CH-1752 VILARS-S-GLANE CHXFull name of fourth joint inventor (if any) WAGNIERES GeorgesInventor's signature [Signature]Date 5th of OCTOBER 2000 Country of Citizenship SwitzerlandResidence 6, chemin de la Drume / CH - 1110 MORCES / SwitzerlandPost Office Address same as residence 56, CHEMIN DE PLANTAZ / CH-1005 LUTRY CHXFull name of fifth joint inventor (if any) VAN DEN BERGH HubertInventor's signature [Signature]Date October 05, 2000 Country of Citizenship The NetherlandsResidence La Bergerie / CH - 1376 GOMMENS-IA VILLE / SwitzerlandPost Office Address same as residence 1025 St. Maurice CHXFull name of sixth joint inventor (if any) JICHLINSKI PatriceInventor's signature [Signature]Date 13.10.2000 Country of Citizenship SwitzerlandResidence 8, chemin du Chêne / CH - 1052 LE MONT-SUR-LAUSANNE / SwitzerlandPost Office Address same as residence CHXFull name of seventh joint inventor (if any) KUCERA PavelInventor's signature [Signature]Date 6-10-2000 Country of Citizenship SwitzerlandResidence La Loutière / 8, chemin de Ratavolar / MONTELESSON / CH-1000 LAUSANNE 27Post Office Address same as residence CHX Switzerland

Full name of eighth joint inventor (if any) _____

Inventor's signature _____

Date _____ Country of Citizenship _____

Residence _____

Post Office Address _____

Full name of ninth joint inventor (if any) _____

Inventor's signature _____

Date _____ Country of Citizenship _____

Residence _____

Post Office Address _____

Applicant: Alexandre M. et al

Serial No.:

Filed:

For:

Attorney's

Docket No.: NITROSP146US

SOLUTION FOR DIAGNOSING OR TREATING TISSUE PATHOLOGIESVERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled SOLUTION FOR DIAGNOSING OR TREATING TISSUE PATHOLOGIES described in:

☒ the specification filed herewith☐ application Serial No. _____, filed _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

☒ no such person, concern, or organization☐ persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention availing to their status as small entities. (37 CFR 1.27)

FULL NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

WAGNIERES Georges

NAME OF INVENTOR

VAN DEN BERGH Hubert

NAME OF INVENTOR

JICHLINSKI Patrice

NAME OF INVENTOR



Signature of Inventor



Signature of Inventor



Signature of Inventor

5th of OCTOBER 2000

Date

5th Oct 2000

Date

5th Oct 2000

Date

Applicant: Alexandre MARTEL et al

Serial No.:

Filed:

Attorney's

Docket No.: NITROSP146US

For: SOLUTION FOR DIAGNOSING OR TREATING TISSUE PATHOLOGIES

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KUCERA Pavel

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

Signature of Inventor

Signature of Inventor

Signature of Inventor

Date

Date

Date

Applicant: Alexandre MARTI et al

Serial No.:

Filed:

For:

Attorney's

Docket No.: NITROSP146US

SOLUTION FOR DIAGNOSING OR TREATING TISSUE PATHOLOGIES

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MARTI Alexandre

LANGE Norbert

ZELLWEGER Matthieu

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

Signature of Inventor

Signature of Inventor

Signature of Inventor

Date

Date

Date

9-10-2000

05-10-2000

20/10/2000